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Substitute for form 1449A/PTO				Complete if Known			
			•	Application Number	09/674,457		
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STATEMENT BY APPLICANT				First Named Inventor	Per Andersson		
				Art Unit	1743		
	(use as many sh	eets as	necessary)	Examiner Name	D. K. Handy		
Sheet	1	of	ŧ	Attorney Docket Number	HO-P02191US0		

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Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
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Examiner Initials*	No.1	Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)		Applicant of Cited Document	Passages or Relevant Figures Appear	ಗ್		
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		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, senal, symposium, catalog, etc), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

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